

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Box ISSUE FEE  
**Commissioner for Patents**  
**Washington, D.C. 20231**  
**Fax** (703)746-4000

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**CURRENT CORRESPONDENCE ADDRESS** (Note: Legibly mark-up with any corrections or use Block 1)

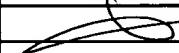
7590 01/03/2003

Alex Chartove  
Morrison & Foerster LLP  
1650 Tysons Blvd.  
Suite 300  
McLean, VA 22102



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Jeffery McCuller	(Depositor's name)
	
April 3, 2003	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/705,566	11/03/2000	William H. Kump	202920	6672

**TITLE OF INVENTION:** SCREW-IN VENT PLUG FOR LEAD-ACID BATTERIES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	04/03/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
MARTIN, ANGELA J	1745	429-089000

<p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</p> <p><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. <b>Use of a Customer Number is required.</b></p>	<p>2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</p>
<u>Morrison &amp; Foerster LLP</u> 2 _____ 3 _____	

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

**(A) NAME OF ASSIGNEE**

Exide Technologies

Alpharetta, GA

Please check the appropriate assignee category or categories (will not be printed on the patent)  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee

Advance Order - # of Copies 6

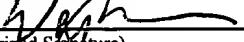
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Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

 (Authorized Signature)

3/3/03 (Date)

Wayne C. Jaeschke, Jr. Reg. No. 38,503 04/3/2003

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